Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF GEORGIA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Jason First name George	First name	
	license or passport).	Middle name	Middle name	_
	Bring your picture identification to your meeting with the trustee.	Voulgaris Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	_
2.	All other names you have used in the last 8 years	3		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6422		

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	doing business as names	· ·	, ,			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		240 Belglade Ct.				
		Grovetown, GA 30813 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Columbia				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1

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Par	Tell the Court About	our Bankruptcy C	ase						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Chapter 11 ☐ Chapter 12							
		Chapter 13							
8.	How you will pay the fee	about how y	ou may pay. Typio Ir attorney is subm	cally, if you are paying the fee yo	with the clerk's office in your local court for mor urself, you may pay with cash, cashier's check, o lf, your attorney may pay with a credit card or ch	or money			
				Illments. If you choose this optio (Official Form 103A).	n, sign and attach the Application for Individuals	to Pay			
		☐ I request th	at my fee be wai	ved (You may request this option	only if you are filing for Chapter 7. By law, a jud Ir income is less than 150% of the official povert				
					installments). If you choose this option, you must al Form 103B) and file it with your petition.	st fill out			
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
		☐ Yes.							
		District	i	When	Case number				
		District	<u> </u>	When	Case number				
		District	t	When	Case number				
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
		Debtor			Relationship to you				
		District	<u> </u>	When	Case number, if known				
		Debtor			Relationship to you				
		District		When	Case number, if known				
11.	Do you rent your residence?	■ No. Go to	line 12.						
	residence:	☐ Yes. Has y	our landlord obtair	ned an eviction judgment against	you?				
			No. Go to line 12	2.					
			Yes. Fill out <i>Initi</i> this bankruptcy		udgment Against You (Form 101A) and file it as	part of			

Debtor 1

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Par	Report About Any Bu	sinesses	You Own as a Sole	Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location	on of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of busines	s, if any
	If you have more than one sole proprietorship, use a		Number, Street,	City, State & ZIP Code
separate sheet and attach it to this petition. Check the appropriate box to describe your business:				priate box to describe your business:
				are Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single As	set Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbro	ker (as defined in 11 U.S.C. § 101(53A))
			☐ Commod	ity Broker (as defined in 11 U.S.C. § 101(6))
			□ None of t	he above
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most re		r 11, the court must know whether you are a small business debtor so that it can set appropriate you are a small business debtor, you must attach your most recent balance sheet, statement of ent, and federal income tax return or if any of these documents do not exist, follow the procedure		
	debtor? For a definition of small	■ No.	I am not filing un	der Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Code.	Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under	Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	, Hazardous Proper	ty or Any Property That Needs Immediate Attention
	Do you own or have any			, ,
17.	property that poses or is	■ No.		
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard	
	identifiable hazard to public health or safety?			
	Or do you own any property that needs immediate attention?		If immediate attention needed, why is it no	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the proper	rty?
	3 · · · · · · · · · · · · · · · · · · ·			Number, Street, City, State & Zip Code

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Debtor 1 Jason George Voulgaris

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	Ous	U. L U	-
Debtor 1	Jason	Georg	ae

ebtor 1	Jason	George	Vou	lgaris
---------	-------	--------	-----	--------

Par 16.	t 6: Answer These Quest What kind of debts do	16a.		consumer debts? Con	sumer debts are defi	ned in 11 U.S.C. § 101(8) as "incurred by an			
	you have?		individual primarily for a pe			(-)			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	s debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7 are paid that funds will be a			erty is excluded and administrative expenses			
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	■ 1-49		□ 1,000-5,000)	□ 25,001-50,000			
	you estimate that you owe?	■ 1-49 □ 50-99		☐ 5001-10,00		☐ 50,001-100,000			
		□ 100-1	99	1 0,001-25,0	000	☐ More than100,000			
		200-9	99						
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	\$10,000,00		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
			001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million				
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,00		□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	_ ' ' '	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	t 7: Sign Below								
For	you	I have ex	amined this petition, and I de	eclare under penalty of	perjury that the inforn	nation provided is true and correct.			
			•	•	, , ,	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					t an attorney to help me fill out this				
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
		bankrupto and 3571	cy case can result in fines up			or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Jason C	George Voulgaris of Debtor 1		Signature of Debto	r 2			
		Executed	on July 16, 2019		Executed on				
			MM / DD / YYYY		MM	/ DD / YYYY			

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For your attorney, if you are represented by one

Debtor 1

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Angela \	Williams Seymour	Date	July 16, 2019
Signature of A	Attorney for Debtor		MM / DD / YYYY
Angela Wil	liams Seymour 636505		
Printed name			
LAW FIRM	OF SEYMOUR & ASSOCIATES, P.	C.	
Firm name	•		
101-B Ross	smore Place		
Augusta, G	A 30909		
Number, Street, C	City, State & ZIP Code		
	706-868-1968(O) 706-868-8009		angieseymour@seymourbankruptcyf
Contact phone	(Fax)	Email address	irm.com
636505 GA			
Bar number & Sta	ite		

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Fill	in this information	on to identify your	case:	716716 EIREFEG. 67716716 68.86.		ago.o o	. 00
Del		Jason George Vo					
Det	otor 2	irst Name	Middle Name	Last Name			
	_	irst Name	Middle Name	Last Name			
Uni	ted States Bankru	ptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA			
1	se number				_	Check if thi amended fi	
						amended n	iirig
∩f	ficial Form	106Sum					
			and Liabilities an	nd Certain Statistical Informatio	n	12/15	;
Be a info you	ns complete and a rmation. Fill out a r original forms, y	accurate as possib all of your schedul you must fill out a	le. If two married people es first; then complete th	are filing together, both are equally responsite information on this form. If you are filing among the box at the top of this page.	le for su	pplying co	rrect
Par	t 1: Summarize	e Your Assets					
						our assets alue of wha	
1.		Property (Official Formantic, Total real estate, for				\$	122,016.00
	1b. Copy line 62	, Total personal pro	perty, from Schedule A/B		;	\$	42,470.15
	1c. Copy line 63	, Total of all property	on Schedule A/B		;	\$	164,486.15
Par	t 2: Summarize	e Your Liabilities					
						our liabilit	
2.			aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule	D	\$	127,909.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the to	tal claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	;	\$	53,375.00
				Your total liabili	ties \$_	1	81,284.00
Par	t 3: Summariz	e Your Income and	Expenses				
4.		r Income (Official Fo		<i>I</i>	:	\$	4,705.29
5.	Schedule J: You Copy your mont	<i>Ir Expenses</i> (Official hly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		:	\$	2,222.64
Par	t 4: Answer Th	nese Questions for	Administrative and Stati	stical Records			
6.			er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court wit	h your oth	ner schedule	es.
7.	■ Yes What kind of de	ebt do you have?					
				debts are those "incurred by an individual primarily g for statistical purposes. 28 U.S.C. § 159.	/ for a per	sonal, famil	y, or
		s are not primarily ith your other sched		ve nothing to report on this part of the form. Check	k this box	and submit	this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,689.38 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	21,946.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	21,946.00

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At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Residential real estate

Check if this is community property

☐ Debtor 1 and Debtor 2 only

Value of property taken from county tax assessor's website

(see instructions)

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$122,016.00

Part 2: Describe Your Vehicles

County

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

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Page:14 of 6019 8:59AM Case:19-10895-SDB Doc#:1 Filed:07/16/19 Entered:07/16/19 09:00:03 Debtor 1 Jason George Voulgaris Case number (if known) Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information.. Jason Voulgaris (plaintiff) vs. Jessica Lee (defendant), Case # \$1.878.55 2017-SCS-0979 = judgment to plaintiff (\$1,878.55 + CC) Brianna Winnett owes remainder of vehicle transfer \$1,800.00 agreement (specifics on Statement of Financial Affairs) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term life insurance policy with estate \$0.00 **TransAmerica** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim........

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$10,111.15

\$10,111.15

\$42,470.15

\$0.00

\$0.00

\$0.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 6: Total farm- and fishing-related property, line 52

Part 5: Total business-related property, line 45

61. Part 7: Total other property not listed, line 54

58.

\$164,486.15

\$42,470.15

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Fill in this inform	nation to identify your	case:		
Debtor 1	Jason George Vo			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA	
Case number _				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Current value of the Amount of the exemption you claim

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Schedule A/B that lists this property	portion you own			.,
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	240 Belglade Ct. Grovetown, GA 30813 Columbia County Residential real estate Value of property taken from county tax assessor's website Line from <i>Schedule A/B</i> : 1.1	\$122,016.00		\$18,730.00 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(1)
	2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct.,	\$27,134.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(3)
Grovetown GA 30813				100% of fair market value, up to any applicable statutory limit	
	Misc. items of household goods and furnishings	\$1,900.00		\$1,900.00	O.C.G.A. § 44-13-100(a)(4)
	Location: 240 Belglade Ct., Grovetown GA 30813 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
	Misc. items of electronics including	\$700.00		\$700.00	O.C.G.A. § 44-13-100(a)(4)
	computers, tablets, iPods, MP3 players, DVD players, TVs, etc. Location: 240 Belglade Ct., Grovetown GA 30813			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Jason George Voulgaris Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Ruger Mini 14, Canik TSP 9MM Pistol, O.C.G.A. § 44-13-100(a)(6) \$2,200.00 \$2,200,00 Cobra FS .380 Pistol, DPMS AR-15 Location: 240 Belglade Ct., 100% of fair market value, up to **Grovetown GA 30813** any applicable statutory limit Line from Schedule A/B: 10.1 Misc. items of clothing O.C.G.A. § 44-13-100(a)(4) \$250.00 \$250.00 Location: 240 Belglade Ct., **Grovetown GA 30813** 100% of fair market value, up to Line from Schedule A/B: 11.1 any applicable statutory limit Misc. items of jewelry O.C.G.A. § 44-13-100(a)(5) \$150.00 \$150.00 Location: 240 Belglade Ct., **Grovetown GA 30813** 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit Dog (1) O.C.G.A. § 44-13-100(a)(6) \$25.00 \$25.00 Location: 240 Belglade Ct., **Grovetown GA 30813** 100% of fair market value, up to Line from Schedule A/B: 13.1 any applicable statutory limit Cash on hand O.C.G.A. § 44-13-100(a)(6) \$295.00 \$295.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: USAA O.C.G.A. § 44-13-100(a)(6) \$1,237.55 \$1,237.55 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: USAA O.C.G.A. § 44-13-100(a)(6) \$0.05 \$0.05 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit TSP: Retirement and/or pension O.C.G.A. § 44-13-100(a)(2.1) \$4.900.00 \$4,900.00 account with Employer Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Jason Voulgaris (plaintiff) vs. Jessica O.C.G.A. § 44-13-100(a)(6) \$1,878.55 \$1,878.55 Lee (defendant), Case # 2017-SCS-0979 = judgment to 100% of fair market value, up to plaintiff (\$1,878.55 + CC) any applicable statutory limit Line from Schedule A/B: 30.1 Brianna Winnett owes remainder of O.C.G.A. § 44-13-100(a)(6) \$1.800.00 \$1.800.00 vehicle transfer agreement (specifics on Statement of Financial Affairs) 100% of fair market value, up to Line from Schedule A/B: 30.2 any applicable statutory limit Term life insurance policy with O.C.G.A. § 44-13-100(a)(11)(C) \$0.00 \$0.00 **TransAmerica** Beneficiary: estate 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit

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3.	,	you claiming a homestead exemption of more than \$170,350? bject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)					
		No					
		Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?					
			No				
			Yes				

Official Form 106C

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Fill in this information to identify you			3	
Debtor 1 Jason George \	/oulgaris			
First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name			
(Spouse II, IIIIIIg)				
United States Bankruptcy Court for the	: SOUTHERN DISTRICT OF GEORGIA			
Case number				
(if known)			_	if this is an
			amend	ded filing
Official Form 106D				
	s Who Have Claims Secure	ed by Propert	v	12/15
Schedule B. Creditors	Wild Have Claims Seedic	od by i ropert	<u>y</u>	12/13
	If two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors have claims secured b	v vour property?			
☐ No. Check this box and submit t	his form to the court with your other schedules.	You have nothing else t	o report on this form.	
■ Yes. Fill in all of the information	,			
	bolow.			
Part 1: List All Secured Claims		, Column A	Column B	Column C
	more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As		Value of collateral	Unsecured
much as possible, list the claims in alphabet	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Chrysler Capital	Describe the property that secures the claim:	\$22,134.00	\$27,134.00	\$0.00
Creditor's Name	2017 Jeep Wrangler 38,000 miles			
Attn: Managing	Location: 240 Belglade Ct.,			
Offcer/Agent	Grovetown GA 30813 As of the date you file, the claim is: Check all that			
PO Box 961275 Fort Worth, TX 76161	apply.			
	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt		e money security		
Date debt was incurred 12/2/2016	Last 4 digits of account number XXX	x		

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Debtor 1 Jason George Voulgaris		Case number (_{if known})		
First Name Middle N	lame Last Name			
2.2 Oxford Glenn	Describe the property that secures the claim:	\$420.00	\$1,900.00	\$0.00
Creditor's Name	Judgment Lien- All real and personal property			
Attn: Managing Officer/Agent PO Box 2278 Alpharetta, GA 30023	Location: 240 Belgrade Ct., Grovetown GA 30813 As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 6712			
2.3 Oxford Glenn Apts, LLC	Describe the property that secures the claim:	\$1.00	\$1,900.00	\$0.00
Attn: Managing Officer/Agent PO Box 2278 Alpharetta, GA 30023	Judgment Lien- All real and personal property Location: 240 Belgrade Ct., Grovetown GA 30813 As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
lacksquare At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 0/0/2004	Last 4 digits of account number 5149			

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Debtor 1 Jason George Voulgaris	Case number (if known)			
First Name Middle N		•		
Oxford Glenn of Wrightsboro, LLC	Describe the property that secures the claim:	\$534.00	\$1,900.00	\$0.00
Attn: Managing Officer/Agent PO Box 2278 Alpharetta, GA 30023 Number, Street, City, State & Zip Code	Judgment Lien- All real and personal property Location: 240 Belgrade Ct., Grovetown GA 30813 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred (2005)	Last 4 digits of account number 8417			
2.5 Oxford Glenn of Wrightsboro, LLC	Describe the property that secures the claim:	\$334.00	\$1,900.00	\$0.00
Attn: Managing Officer/Agent PO Box 2278 Alpharetta, GA 30023 Number, Street, City, State & Zip Code	Judgment Lien- All real and personal property Location: 240 Belgrade Ct., Grovetown GA 30813 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Number, Street, Oity, State & Zip Code	■ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 5/12/2005	Last 4 digits of account number 8153			

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Debtor 1 Jason George Voulgaris			Case number (if known)			
	First Name Middle N		•			
2.6	Oxford Glenn of Wrightsboro, LLC	Describe the property that secures the claim:	\$260.00	\$1,900.00	\$0.00	
	Attn: Managing Officer/Agent PO Box 2278 Alpharetta, GA 30023	Judgment Lien- All real and personal property Location: 240 Belgrade Ct., Grovetown GA 30813 As of the date you file, the claim is: Check all that apply. Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Who	o owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.				
	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or scar loan)	secured			
_	Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, mechanic's lien)				
	At least one of the debtors and another	Judgment lien from a lawsuit				
	Check if this claim relates to a community debt	Other (including a right to offset)				
Date	e debt was incurred 4/13/2005	Last 4 digits of account number 7656	<u> </u>			
2.7	Oxford Glenn of Wrightsboro, LLC	Describe the property that secures the claim:	\$470.00	\$1,900.00	\$119.00	
	Creditor's Name Attn: Managing	Judgment Lien- All real and personal property Location: 240 Belgrade Ct.,				
	Officer/Agent PO Box 2278 Alpharetta, GA 30023	As of the date you file, the claim is: Check all that apply. Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Who	o owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.				
	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured			
_	Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, mechanic's lien)				
	At least one of the debtors and another	Judgment lien from a lawsuit				
	Check if this claim relates to a community debt	Other (including a right to offset)				
Date	e debt was incurred 3/15/2005	Last 4 digits of account number 7403	3			

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Debtor 1 Jason George Voulgari	S	ase number (if known)		
First Name Middle N	lame Last Name		·	
2.8 Oxford Glenn of Wrightsboro, LLC	Describe the property that secures the claim:	\$470.00	\$1,900.00	\$470.00
Creditor's Name	Judgment Lien- All real and personal property			
Attn: Managing Officer/Agent PO Box 2278 Alpharetta, GA 30023	Location: 240 Belgrade Ct., Grovetown GA 30813 As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	ured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a community debt	□ Judgment lien from a lawsuit □ Other (including a right to offset)			
Date debt was incurred 2/15/2005	Last 4 digits of account number 4148			
2.9 Quicken Loans	Describe the property that secures the claim:	\$103,286.00	\$122,016.00	\$0.00
Creditor's Name Attn: Managing	240 Belglade Ct. Grovetown, GA 30813 Columbia County Residential real estate Value of property taken from county tax assessor's website			
Officer/Agent 1050 Woodward Ave. Detroit, MI 48226	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	ured		
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgage			
Date debt was incurred 4/9/2012	Last 4 digits of account number XXXX			
Allei de la constanti de la co	N. I	\$407.000 f	00	
Add the dollar value of your entries in C If this is the last page of your form, add	Column A on this page. Write that number here: the dollar value totals from all pages.	\$127,909.0		
Write that number here:		\$127,909.0	UU	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Page:24 of 6019 8:59AM Case:19-10895-SDB Doc#:1 Filed:07/16/19 Entered:07/16/19 09:00:03 Fill in this information to identify your case: Debtor 1 Jason George Voulgaris Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 \$893.00 **Barclavs Bank Delaware** Last 4 digits of account number unk Nonpriority Creditor's Name 12/19/2008 Attn: Managing Officer/Agent When was the debt incurred? PO Box 8803 Wilmington, DE 19899-8803 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other, Specify

Is the claim subject to offset?

☐ Debts to pension or profit-sharing plans, and other similar debts

Misc. consumer purchases

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4.2	Capital One	Last 4 digits of account number 1781	\$2,863.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent 15000 Capital One Dr.	When was the debt incurred? 12/27/2014	
	Richmond, VA 23238 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		• • • •	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 1777	\$893.00
	Attn: Managing Officer/Agent 15000 Capital One Dr.	When was the debt incurred? 12/27/2014	
	Richmond, VA 23238 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	No		
	Yes	■ Other. Specify	
4.4	Dept of Education/Nelnet	Last 4 digits of account number mult	\$21,946.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent 121 S 13th St.	When was the debt incurred? multiple	
	Lincoln, NE 68508 Number Street City State Zip Code	As of the date you file the plain is Obselved that such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 2 only	·	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	dept Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student loan	

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4.5	Discover Fin Svcs LLC	Last 4 digits of account number unk	\$9,961.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent PO Box 15316	When was the debt incurred? 8/17/2010	
	Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Misc. consumer purchases	
4.6	JPMCB Card	Last 4 digits of account number unk	\$3,461.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent PO Box 15298	When was the debt incurred? 2/9/2013	V V V V V V V V V V
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Misc. consumer purchases	
4.7	Paypal	Last 4 digits of account number unk	\$2,000.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent PO Box 5138	When was the debt incurred? unknown	Ψ=,000.00
	Timonium, MD 21094 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Misc. consumer purchases	

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4.8	Portfolio Recover Assoc for Citibank	Last 4 digits of account number	XXXX	\$1,698.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent 120 Corporate Blvd., Suite 100 Norfolk, VA 23502	When was the debt incurred?	3/28/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Misc. cons	•	
4.9	Portfolio Recover Assoc for Synchrony	Last 4 digits of account number	mult	\$7,585.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent 120 Corporate Blvd., Suite 100 Norfolk, VA 23502	When was the debt incurred?	multiple	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Misc. cons	umer purchases	
4.1	SYNCB/Care Credit	Last 4 digits of account number	unk	\$2,075.00
	Nonpriority Creditor's Name Attn: Managing Officer/Agent 950 Forrer Blvd.	When was the debt incurred?	12/24/2014	
	Kettering, OH 45420 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Misc. cons	umer purchases	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

unk

have more than one creditor for any of the deb notified for any debts in Parts 1 or 2, do not fill		e additional creditors here. If you do not have additional persons to be
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
Capital One c/o Cooling & Winter,	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Managing Officer/Agent PO Box 100150		■ Part 2: Creditors with Nonpriority Unsecured Claims
Marietta, GA 30061-9918	Last 4 digits of account number	1777
Name and Address	On which entry in Part 1 or Part 2 c	lid you list the original creditor?
Capital One c/o Cooling & Winter,	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
LLC Attn: Managing Officer/Agent PO Box 100150 Marietta, GA 30061-9918		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	1777
Name and Address	On which entry in Part 1 or Part 2 c	lid you list the original creditor?
SYNCB/OLD NAVY DC	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Managing Officer/Agent PO Box 965005 Orlando, Fl. 32896		■ Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Clair	n
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total	6f.	Student loans	6f.	Total Clair	n 21,946.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,429.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	53,375.00

Last 4 digits of account number

Case:19-10895-SDB Doc#:1 Filed:07/16/19 Entered:07/16/19 09:00:03 Page:29 of 60 8:59AM

Fill in this inform					
Debtor 1	Jason George Vo	ulgaris			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA		
Case number					
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	City		State	ZIF Code	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5					
	Name				_
	Number	Street			_
		Succi			
	City		State	ZIP Code	

Page:30 of 6019 8:59AM Case:19-10895-SDB Doc#:1 Filed:07/16/19 Entered:07/16/19 09:00:03 Fill in this information to identify your case: Debtor 1 Jason George Voulgaris First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedules that apply:

3.1 ☐ Schedule D. line Name ☐ Schedule E/F. line ☐ Schedule G, line Number Street City State ZIP Code 3.2 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G, line _ Number ZIP Code City State

Fill	in this information to identify your c	ase:								
Del	btor 1 Jason Georg	ge Voulgaris			_					
	btor 2				_					
Uni	ited States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF GEORGIA							
	se number nown)		-			Check if th		ina		
						☐ A supp	olement s	howing p	oostpetition clowing date:	hapter
0	fficial Form 106l					MM / [DD/ YYYY	7		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	ır spouse is not filing w	ith you, do not includ	le infori	natio	on about you	r spouse	. If more	space is ne	eded,
1.	Fill in your employment information.		Debtor 1			Dek	otor 2 or ı	non-filin	g spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed			
	information about additional		☐ Not employed			1	Not emplo	oyed		
	employers.	Occupation	VA Police							
	Include part-time, seasonal, or self-employed work.	Employer's name	DFAS							
	Occupation may include student or homemaker, if it applies.	Employer's address	1240 E. 9th Stree Cleveland, OH 4							
		How long employed t	here? 2 years							
Pai	rt 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any	line, write \$0 i	n the spa	ce. Includ	de your non-f	filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mplo	oyers for that	oerson or	the lines	s below. If yo	u need
						For Debtor		or Debto on-filing	or 2 or spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	•		2.	\$	4,518	.19 \$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0	.00 +9	\$	N/A	

4,518.19

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Jason George Voulgaris		(Case r	number (<i>if knov</i>	vn)				
					For	Debtor 1			ebtor 2 or		
	Copy	y line 4 here	4.		\$	4,518.1	9	\$		N/A	
_			•			·					
5.		all payroll deductions:	_								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	585.6		\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.0		\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$	150.9		\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.		\$	0.0		\$		N/A	
	5e.	Insurance	5e.		\$	559.9		\$		N/A	
	5f.	Domestic support obligations	5f.		\$	0.0	00	\$		N/A	
	5g.	Union dues	5g.		\$	45.3		\$		N/A	
	5h.	Other deductions. Specify:	5h.	.+	\$	0.0	00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,341.8	34	\$	<u> </u>	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,176.3	35_	\$		N/A	
8.	List	all other income regularly received:									
	8a.	Net income from rental property and from operating a business,									
		profession, or farm									
		Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.0	١٨	\$	·	N/A	
	8b.	Interest and dividends	8b.		\$ _	0.0		\$—		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent			Ψ	0.0	<i></i>	Ψ	'	N/A	
	oc.	regularly receive	711L								
		Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c.		\$	150.0	00	\$	ľ	N/A	
	8d.	Unemployment compensation	8d.		\$	0.0	00	\$		N/A	
	8e.	Social Security	8e.		\$	0.0	00	\$		N/A	
	8f.	Other government assistance that you regularly receive									
		Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce								
		Specify: VA Disability	8f.		\$	1,290.8	36	\$	ı	N/A	
	8g.	Pension or retirement income	8g.		\$	0.0		\$		N/A	
	ŭ	2018 Federal Tax Refund (Pro	Ū		_		_				
	8h.	Other monthly income. Specify: Rata)	8h.	.+	\$	82.2	25	⊦\$	ļ	N/A	
		2018 State Tax Refund (Pro Rata)			\$	5.8	33	\$		N/A	
				г	_			$\overline{}$			1
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	1		1,528.9	94	\$		N/A	
			г	_							1
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	4	l,705.29 +	\$		N/A = \$	5	4,705.29
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L								
11	State	e all other regular contributions to the expenses that you list in Sched	ulo I								
		ide contributions from an unmarried partner, members of your household, you		nde	ents	vour roomm	ates	and			
		r friends or relatives.	за. аоро		J. 110,	,		,			
	Do n	ot include any amounts already included in lines 2-10 or amounts that are r	ot availa	able	to pa	ay expenses	liste	ed in <i>Sc</i>	hedule J.		
	Spec	cify:							11. + \$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The that amount on the Summary of Schedules and Statistical Summary of Ce							40 6		4 70E 20
	appli	ies							12. \$		4,705.29
										mbin	_
12	Do :	rou expect an increase or decrease within the year often year file this fa	rm?						mo	nthly	income
13.	Б В	rou expect an increase or decrease within the year after you file this fo	1111 (
	_	No.		_							•
		Yes. Explain: The TSP savings has been excluded from Sch									
		\$150.00 per month in Child Support upon divo	rce bei	ng	tına	ilized; this	am	ount is	reflecte	a on	

Official Form 106l Schedule I: Your Income page 2

Eill	in this informa	tion to identify ve	N. I. 0000:										
		tion to identify yo											
Debtor 1 Jason George Voulgaris							Check if this is:						
Dob	otor 2							n amended filing	ving postpetition chapte				
	ouse, if filing)								the following date:	;I			
								•					
Unit	ted States Bankr	uptcy Court for the:	: SOUTH	IERN DISTRICT OF GE	EORGIA		N	IM / DD / YYYY					
	se number nown)												
	fficial Fo												
S	chedule	J: Your I	Exper	nses					12	2/15			
info	ormation. If moments	ore space is ne n). Answer ever	eded, atta y questio	. If two married people ich another sheet to th n.									
		ibe Your House	hold										
1.	Is this a join												
	■ No. Go to			-1- hh-1-10									
		s Debtor 2 live i	n a separ	ate nousenoid?									
	□ No	_	st file Offic	al Form 106J-2, <i>Expens</i>	ses for Separate House	hold of D	ebto	r 2.					
2.	Do you have	e dependents?	□ No										
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information fo each dependent			_	Dependent's age	Does dependent live with you?				
	Do not state	the							□ No				
	dependents				Son			9	Yes				
									□ No				
									☐ Yes				
									□ No				
									Yes				
									□ No				
2	Do your ove	oncoc includo	_						☐ Yes				
3.	expenses of yourself and	enses include f people other th d your depender	han nts? □	No Yes									
Est	imate your ex	ate Your Ongoing penses as of your consession of your consessions are after the best of the second o	our bankr	ly Expenses uptcy filing date unles y is filed. If this is a su	s you are using this found	orm as a J, check	sup the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in th	i ne			
app	olicable date.												
the	value of such	n assistance and		government assistand cluded it on <i>Schedule</i>				V2					
(Of	ficial Form 10	6l.)						Your expe	enses				
4.		or home owners and any rent for the		ses for your residence or lot.	e. Include first mortgage	e 4.	\$		799.00				
	If not includ	led in line 4:											
	4a. Real e	estate taxes				4a.	\$		0.00				
		rty, homeowner's	s, or renter	's insurance		4b.			50.99				
				upkeep expenses		4c.	\$		0.00				
_		owner's associat				4d.			0.00				
5.	Additional n	nortgage payme	ents for yo	our residence, such as	home equity loans	5.	\$		0.00				

Deb	tor 1 _Jason George Voulgaris	Case num	nber (if known)	
6.	Utilities:			
о.	6a. Electricity, heat, natural gas	6a.	\$	176.00
	6b. Water, sewer, garbage collection	6b.		48.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		185.00
	6d. Other. Specify: Netflix	6d.	· -	12.99
7.	Food and housekeeping supplies	0d. 7.	· ·	300.00
7. 8.	Childcare and children's education costs	7. 8.	· <u> </u>	
9.		9.	\$ \$	230.00
-	Clothing, laundry, and dry cleaning Personal care products and services	9. 10.	· ·	0.00
	·			50.00
	Medical and dental expenses	11.	Φ	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.		·	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	18.99
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	150.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify: car tags and car taxes	16.	\$	1.67
17.	Installment or lease payments:		_	
	17a. Car payments for Vehicle 1	17a.	· ·	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	·	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify: Pet Care (food)	21.	+\$	40.00
	Pet Care (grooming)		+\$	60.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,222.64
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,222.64
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		4,705.29
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,222.64
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	2,482.65

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: The Debtor's cell phone payment will decrease to \$82.36 per month begining 9/1/2019. The Debtor's Student Loan payment will be \$177.92 per month begining 10/25/2019. The Debtor has joint custody of his dependent.

Fill in t	his informa	ation to identify your	case:				
Debtor	1	Jason George Vo	ulgaris				
		First Name	Middle Name	Las	t Name		
Debtor	2						
(Spouse if	, filing)	First Name	Middle Name	Las	t Name		
United \$	States Banl	kruptcy Court for the:	SOUTHERN DISTRICT	T OF GEOR	SIA		
Case ni	umber						
(if known)							☐ Check if this is an
							amended filing
You mu: obtainin	st file this t	form whenever you fi	connection with a ban	s or amend	ed schedules. N	/laking a false sta	ntement, concealing property, or 000, or imprisonment for up to 20
	Sign I	Below					
Di	d you pay	or agree to pay some	one who is NOT an atto	rney to help	you fill out bar	nkruptcy forms?	
	No						
	Yes. Na	ime of person					nkruptcy Petition Preparer's Notice,
						Declaration	on, and Signature (Official Form 119)
		y of perjury, I declare true and correct.	that I have read the sum	nmary and s	chedules filed v	with this declarat	tion and
Х	/s/ Jasor	n George Voulgaris		Х			
	Jason G	eorge Voulgaris			Signature of De	ebtor 2	
	Signature	of Debtor 1					
	Date J u	ıly 16, 2019			Date		

Fill	in this inforn	nation to identify you	case:			
	otor 1	Jason George V				
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF GEORGIA		
Cas	e number _					
(if kn	own)					heck if this is an mended filing
∩f	ficial Fo	rm 107				
	ficial Fo atement		Affairs for Individ	duals Filing for B	ankruptcy	4/19
infoi num	rmation. If m	ore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup y additional pages, write you	
12an 1.		r current marital statu	rital Status and Where You s?	Lived Before		
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory	
	■ No					
	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (O	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$26,391.09	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)
	last calend nuary 1 to		: per 31, 2018)	■ Wages, commissions, bonuses, tips	\$45,687.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a l	business	
			before that: per 31, 2017)	■ Wages, commissions, bonuses, tips	\$40,012.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		Operating a	business	
	Include includ	ome reg oublic be f you are ource ar	pardless of wheth enefit payments; e filing a joint cas	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a rest; dividends; money collec- you received together, list it of	alimony; child supported from lawsuits; only once under De	royalties; and btor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
From the	m January date you fi	1 of cu iled for	rrent year until bankruptcy:	VA Disability	\$9,036.02			
	last calend nuary 1 to		er 31, 2018)	VA Disability	\$15,490.32			
			before that: per 31, 2017)	VA Disability	\$15,490.32			
Pari	t 3: List	Certain	Payments You	Made Before You Filed for I	Bankruptcy			
6.		Neithe	Debtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	umer debts. Consumer debt	s are defined in 11	U.S.C. § 10 ⁻	1(8) as "incurred by an
		During	the 90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,825* or mor	e?	
				•				
		☐ Ye	paid that cr not include	each creditor to whom you pai editor. Do not include paymen payments to an attorney for th t on 4/01/22 and every 3 years	nts for domestic support oblights bankruptcy case.	gations, such as ch	ild support a	nd alimony. Also, do
	Yes.			or both have primarily consu		l of \$600 or more?		
		J	ino oo dayo bore					
		■ No						
		_ •	Go to line 7 s List below e include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				

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7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one fo
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a del	ot that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	
	rt 4: Identify Legal Actions, Repossession		paid	still owe	Include credit	or's name
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	s, divorces, collectio	n suits, paternity a	actions, support	or custody
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Jason Voulgaris (Plaintiff) vs Ping Hong Tang (Defendant) 2018EDR0069	Divorce	Superior Court County Attn: Clerk 640 Ronald Re Evans, GA 308	agan Dr.	■ Pending □ On appea □ Conclude	
	Capital One c/o Cooling & Winter, LLC vs. Jason Voulgaris, Case # 2019-SCS-1777 2019-SCS-1777	Suit on Account	Magistrate Cou Columbia Cou Attn: Clerk 640 Ronald Re Box 777 Evans, GA 308	nty agan Dr., PO	■ Pending □ On appea □ Conclude	
	Capital One c/o Cooling & Winter, LLC vs. Jason Voulgaris, Case # 2019-SCS-1781 2019-SCS-1781	Suit on Account	Magistrate Cou Columbia Cou Attn: Clerk 640 Ronald Re Box 777 Evans, GA 308	nty agan Dr., PO	■ Pending □ On appea □ Conclude	
0.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	I			p. oporty

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m.com

Augusta, GA 30909

angieseymour@seymourbankruptcyfir

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
	MoneySharp Credit Counseling Inc. 1916 N Fairfield Ave. Suite 200 Chicago, IL 60647	Pre-Filing Certi	ficate of Counse	eling	7/11/19	\$10.00
	United States Bankruptcy Court PO Box 1487 Augusta, GA 30903	Filing Fees			7/11/19	\$105.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	s or to make payment			r transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already No	siness or financial afforder as security (such as	airs? the granting of a se			
	Yes. Fill in the details.	5		.	,	5
	Person Who Received Transfer Address	Description and v property transfer			any property or received or debts change	Date transfer was made
	Person's relationship to you Brianna Winnett 2654 Clear Cir. N. Jacksonville, FL 32207-9416	2008 Nissan Ve value	ersa, \$2500	\$700.00 r	eceived	11/2018
	niece					
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No ■ Yes. Fill in the details.		ny property to a se	lf-settled tru	ıst or similar device	of which you are a
	Name of trust	Description and	value of the proper	rty transferr	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	other financial accou	nts; certificates of			
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo mo	te account was sed, sold, oved, or nsferred	Last balance before closing or transfer

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21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for bankruptcy, an	y safe deposit box or other depositor	ry for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy?	
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility	Who else has or had access	Describe the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code)	besonde the contents	have it?
Par	19: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any propert	y you borrowed from, are storing for,	or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	<u> </u>	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental la	aw, whether you now own, operate, o	r utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ntal law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	ZIP Code) v release of hazardous material?		
	_	, , , , , , , , , , , , , , , , , , , ,		
	■ No □ Yes. Fill in the details.			
		Covernmental	Environmental law if you	Data of nation
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

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☐ Yes. Name of Person

☐ Yes

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Fill in this inform	nation to identify your case:	
Debtor 1	Jason George Voulgaris	
Debtor 2 (Spouse, if filing)		
United States B	sankruptcy Court for the: Southern District of Georgia	
Case number (if known)		

Check	as directed in lines 17 and 21:
1	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,398.52 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1

\$

-\$

\$

0.00

0.00

0.00 Copy here -> \$

0.00

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

0.00

Case number (if known)

Jason George Voulgaris

Debtor 1

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Jason George Voulgaris Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. GA 2 16b. Fill in the number of people in your household. 63.303.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 5.689.38 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 5,689.38 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 5,689.38 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 68,272.56 \$ 20b. The result is your current monthly income for the year for this part of the form 63,303.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Jason George Voulgaris **Jason George Voulgaris** Signature of Debtor 1 Date July 16, 2019 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

				_		
Fill in	this information to	dentify your case:				
Debto	r 1 Jason Ge	orge Voulgaris				
Debto (Spou	r 2 se, if filing)					
United	l States Bankruptcy C	ourt for the: Southern Dist	trict of Georgia			
Case (if kno	number wn)			☐ Check	if this is an amended	filing
Officia	I Form 122C-2					
		culation of You	ır Disposable Ir	ncome		04/19
	out this form, you wi itment Period (Offici		opy of Chapter 13 Stateme	ent of Your Current Monthly	Income and Calculatio	n of
space	is needed, attach a s		n, Include the line number	ther, both are equally respo to which additional informa		
Part 1	Calculate Your	Deductions from Your Inc	come			
the	questions in lines 6		ards, go online using the l	or certain expense amounts. ink specified in the separate		
exp	enses if they are high	er than the standards. Do no	ot include any operating exp	ense. In later parts of the form, penses that you subtracted fro s income in line 13 of Form 122	m income in lines 5 and	
If yo	our expenses differ fro	m month to month, enter the	e average expense.			
Not	e: Line numbers 1-4 a	re not used in this form. The	ese numbers apply to inforn	nation required by a similar for	m used in chapter 7 cas	ses.
5.	The number of peo	ple used in determining y	our deductions from inco	me		
		ny additional dependents w	ed as exemptions on your fe whom you support. This num		2	
Nat	ional Standards	You must use the IRS	National Standards to answ	ver the questions in lines 6-7.		
6.		l other items: Using the nu dollar amount for food, cloth		d in line 5 and the IRS National	\$	1,288.00
7.	the dollar amount fo people who are 65 c	out-of-pocket health care.	The number of people is spole have a higher IRS allowa	ntered in line 5 and the IRS Na lit into two categoriespeople ance for health car costs. If you	who are under 65 and	

Official Form 122C-2

Debtor 1 Jason George Voulgaris Case number (if known)

People who are under 65 years of age			
7a. Out-of-pocket health care allowance per person	\$	55	_
7b. Number of people who are under 65	X	2	
7c. Subtotal. Multiply line 7a by line 7b.	\$	110.00	Copy here=> \$110.00
People who are 65 years of age or older			
7d. Out-of-pocket health care allowance per person	\$	114	_
7e. Number of people who are 65 or older	X	0_	
7f. Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=> \$
7g. Total. Add line 7c and line 7f			\$110.00 Copy total here=> \$110.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

575.00

- 9. Housing and utilities Mortgage or rent expenses:
 - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

\$ 1,125.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Averaç payme	ge monthly ent				
Quicken Loans	\$	799.00	_			
9b. Total average monthly payment	\$	799.00	Copy here=>	-\$	799.00	Repeat this amou on line 33a.
Net mortgage or rent expense.						
Subtract line 9b (total average monthly payment) from I or rent expense). If this number is less than \$0, enter \$		oortgage	\$	326.00	Copy here=>	. \$ 326.0

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$ 0.00

Explain why:

9c.

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13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle be You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense more than two vehicles. Vehicle 1 Describe Vehicle 1: 2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct., Grovetown GA 30813 13a. Ownership or leasing costs using IRS Local Standard	Debtor 1	Jason George Voulgaris			Cas	se number (if	known)		
■ 1. Go to line 12. □ 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitian statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle be You may not claim the expense If you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense more than two vehicles. Vehicle 1 Describe Vehicle 1: 2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct.,	11.	Local transportation expenses:	Check the number of vehic	cles for which yo	ou claim an o	ownership	or operating	g expense.	
2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. S		□ 0. Go to line 14.		·					
12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expenses: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle be more than two vehicles. 14. Vehicle 1 Describe Vehicle 1: 2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct., Grovetown GA 30813 15. Ownership or leasing costs using IRS Local Standard		■ 1. Go to line 12.							
12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Ost that apply for your Census region or metropolitan statistical area. \$ 210 Vehicle 1 Describe Vehicle 1: 2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct., Grovetown GA 30813 13a. Ownership or leasing costs using IRS Local Standard		2 or more. Go to line 12.							
operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. \$ 210 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle be You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense more than two vehicles. Vehicle 1 Describe Vehicle 1: 2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct., Grovetown GA 30813 13a. Ownership or leasing costs using IRS Local Standard	12		ng the IRS Local Standards	s and the number	r of vehicles	s for which	n vou claim th	ne	
You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense more than two vehicles. Vehicle 1 Describe Vehicle 1: 2017 Jeep Wrangler 38,000 miles Location: 240 Belglade Ct., Grovetown GA 30813 13a. Ownership or leasing costs using IRS Local Standard									210.00
Grovetown GA 30813	13.	You may not claim the expense if							
13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptery. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Chrysler Capital Total Average Monthly Payment \$ 443.52 Total Average Monthly Payment \$ 443.52 Copy	Vel			,000 miles Lo	cation: 24	l0 Belgla	ade Ct.,		
Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Chrysler Capital Total Average Monthly Payment \$ 443.52 Total Average Monthly Payment \$ 443.52 Copy net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard. \$ 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment \$ 0.00 Total average monthly payment \$ 0.00 Copy net Vehicle 2 Average monthly payment \$ 0.00 Total average monthly payment \$ 0.00 Copy net Vehicle 2 Ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. Copy net Vehicle 2 Ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0, enter \$0.	13a.	Ownership or leasing costs using	IRS Local Standard			\$	508.00		
To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Payment Chrysler Capital Total Average Monthly Payment \$ 443.52 Total Average Monthly Payment \$ 443.52 Copy here => \$ 443.52 Copy here => \$ \$ 64.48 Copy net vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard	13b.	Average monthly payment for all	debts secured by Vehicle 1.						
are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Payment Chrysler Capital Total Average Monthly Payment \$ 443.52 Total Average Monthly Payment \$ 443.52 Copy here => -\$ 443.52 Repeat this amount on line 33b. Repeat this amount on line 35b. 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard		Do not include costs for leased ve	hicles.						
Chrysler Capital \$ 443.52		are contractually due to each sec							
Total Average Monthly Payment \$ 443.52 Copy here => -\$ 443.52 Copy net wine 33b. 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0		Name of each creditor for	Vehicle 1		nthly				
Total Average Monthly Payment \$		Chrysler Capital		\$ 4	43.52				
Subtract line 13b from line 13a. if this number is less than \$0, enter \$0		Total Av	rerage Monthly Payment	\$ 44	40 50		§443	amount on	
Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard	13c.	•	•	o. enter \$0				Vehicle 1	
13d. Ownership or leasing costs using IRS Local Standard			•	, + -		\$	64.48	1 .	64.48
13d. Ownership or leasing costs using IRS Local Standard	Vel	hicle 2 Describe Vehicle 2:						_	
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Total average monthly payment \$	13e.	3 71 7	debts secured by Vehicle 2.	. Do not include	costs for				
Total average monthly payment \$ Copy here		Name of each creditor for	Vehicle 2	_	ithly				
Total average monthly payment \$				\$					
Subtract line 13e from line 13d. if this number is less than \$0, enter \$0		Total av	erage monthly payment	\$	h	ere	0.0	amount on line	
	13f.	•	•	, enter \$0		\$	0.00	Vehicle 2 expense here	0.00
14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.	14.							n the	0.00
15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may		Additional public transportation also deduct a public transportation	n expense: If you claimed 1 n expense, you may fill in w	1 or more vehicle hat you believe	es in line 11	and if you	u claim that y	you may ou may	0.00

	er Necessary Expenses	In addition to the expense of the following IRS categories:		s listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, soc	ial security taxes, and Medio owever, if you expect to reco om the total monthly amoun	care taxes eive a tax	s. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	585.69
17.	Involuntary deductions: T contributions, union dues, a	, , ,	uctions th	at your job re	quires, such as retirement		
	Do not include amounts that	t are not required by your jo	b, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payn	nents that you make for your r life insurance on your depo	r spouse's	s term life insu	e insurance. If two married people are arance. I spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: administrative agency, such Do not include payments or	as spousal or child support	t payment	s.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	nly amount that you pay for e	education	that is either	required:		
	as a condition for your jo	b, or					
	for your physically or me	ntally challenged dependen	t child if r	o public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total month Do not include payments fo			-	sitting, daycare, nursery, and preschool.	\$	0.00
22.		h and welfare of you or you	r depende	ents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		0.00
	Payments for health insurar	nce or health savings accou	nts should	d be listed only	y in line 25.	\$	0.00
23.	for you and your dependent phone service, to the extens income, if it is not reimburse Do not include payments fo	s, such as pagers, call waiti necessary for your health a ed by your employer. r basic home telephone, into	ng, caller and welfar ernet and	identification, e or that of yo	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment		
		ported on line 5 of Official F	orm 1220	C-1, or any am	ount you previously deducted.	+\$	0.00
24.	Add all of the expenses all Add lines 6 through 23.	•		•		+ \$ \$	3,159.17
	Add all of the expenses a	llowed under the IRS expe	nse allov	vances.	ount you previously deducted.		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabili	Ilowed under the IRS expe s These are additional of Note: Do not include a	ense allow leductions any expen	vances. s allowed by the se allowances	ount you previously deducted.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disabilinsurance, disabilinsurance, disability insurance	Ilowed under the IRS expe s These are additional of Note: Do not include a	ense allow leductions any expen	vances. s allowed by the se allowances	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses at Add lines 6 through 23. litional Expense Deduction Health insurance, disabilitinsurance, disabilitinsurance, disability insurary your dependents.	Ilowed under the IRS expe s These are additional of Note: Do not include a	leductions iny expen avings ac bunts that	vances. s allowed by the se allowances count expensare reasonab	ne Means Test. s listed in lines 6-24.	\$	
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Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insuranty your dependents. Health insurance Disability insurance	s These are additional on Note: Do not include a ty insurance, and health side, and health savings according to the Note: Note	leductions any expensions avings acounts that	vances. s allowed by the se allowances count expension are reasonab 0.00 0.00	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	s These are additional or Note: Do not include a ty insurance, and health side, and health savings accordance.	leductions any expensions that	vances. s allowed by the se allowances account expensare reasonab 0.00 0.00 54.17	ne Means Test. Is listed in lines 6-24. Is listed in lines 6-24. Is listed in lines 6-24, lises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	3,159.17
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	s These are additional or Note: Do not include a ty insurance, and health sice, and health savings accordance.	leductions any expensions that	vances. s allowed by the se allowances account expensare reasonab 0.00 0.00 54.17	ne Means Test. Is listed in lines 6-24. Is listed in lines 6-24. Is listed in lines 6-24, lises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	3,159.17
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reas	These are additional of Note: Do not include a sty insurance, and health suce, and health suce, and health suce, and health suce, and health savings accordant amount? To the care of household of onable and necessary care of your immediate family when the succession of the care of your immediate family when the succession of the care of your immediate family when the succession of the care of your immediate family when the succession of the	leductions any expensions avings accounts that \$\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	vances. s allowed by the se allowances are reasonabed. 0.00 0.00 54.17 54.17 nembers. The ort of an elder alle to pay for s	count you previously deducted. The Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health only necessary for yourself, your spouse, of the country o	\$	3,159.17
25. 26.	Add all of the expenses al Add lines 6 through 23. Iitional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you how much do you yes Continued contributions to continue to pay for the reasyour household or member include contributions to an approtection against family	These are additional of Note: Do not include a sty insurance, and health suce, and health suce, and health savings accordant amount? To the care of household of onable and necessary care of your immediate family whaccount of a qualified ABLE violence. The reasonably necessary care.	leductions ary expensions avings are bunts that \$\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	vances. s allowed by the se allowances are reasonable on the second on t	count you previously deducted. The Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health only necessary for yourself, your spouse, of the country o	\$s	3,159.17 54.17

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ebtor 1	Jason George Voulgaris	Case number (if known)			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operating e	expenses on		
	If you believe that you have home energy c 8, then fill in the excess amount of home en	osts that are more than the home energy costs included in expergy costs	penses on lir	ne	
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the addry.	ditional	\$_	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expenses (not nependent children who are younger than 18 years old to attended	nore than d a private or		
	You must give your case trustee documental claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain why the a not already accounted for in lines 6-23.	amount		
	* Subject to adjustment on 4/01/22, and ever	ery 3 years after that for cases begun on or after the date of ac	djustment.	\$_	0.00
		he monthly amount by which your actual food and clothing expand allowances in the IRS National Standards. That amount canres in the IRS National Standards.			
		ional allowance, go online using the link specified in the separ so be available at the bankruptcy clerk's office.	rate		
	You must show that the additional amount of	claimed is reasonable and necessary.		\$_	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organization.	e amount that you will continue to contribute in the form of casl inization. 11 U.S.C. § 548(d)(3) and (4).	h or financial		
	Do not include any amount more than 15%	of your gross monthly income.		_ \$ _	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$	54.17
	_				
Ded	uctions for Debt Payment				
	uctions for Debt Payment For debts that are secured by an interest	in property that you own, including home mortgages, yeh	icle		
33. F	·	in property that you own, including home mortgages, veh 33a through 33e.	icle		
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually due to each secure			
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paym	33a through 33e. ent, add all amounts that are contractually due to each secure		Averaç payme	ge monthly ent
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractually due to each secure	ed		
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractually due to each secure nkruptcy. Then divide by 60.	ed	payme	ent
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractually due to each secure nkruptcy. Then divide by 60.	ed =>	payme	ent
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33. F le constant de constant	For debts that are secured by an interest boans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	and all amounts that are contractually due to each secure inkruptcy. Then divide by 60. Identify property that secures the debt Doe incluor in incluor i	=> => es payment ude taxes esurance? No Yes No Yes	\$\$	799.00 443.52
33. F le constant de constant	For debts that are secured by an interest boans, and other secured debt, fill in lines or calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	add all amounts that are contractually due to each secure inkruptcy. Then divide by 60. Identify property that secures the debt Doe incluor in include the property in the p	=> => es payment ude taxes asurance? No Yes No Yes No Yes No Yes +	\$\$ \$\$	799.00 443.52
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1,383.55

4,596.89

Copy total here=>

Copy line 37, All of the deductions for debt payment

Total deductions.....

4.596.89

\$

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Debtor 1	tor 1 Jason George Voulgaris Ca				Case	se number (if known)			
Part 2:	De	termine You	r Disposable Income Under 11	U.S.C. § 132	5(b)(2)				
39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period					od.		. \$	5,689.38	
((40. Fill in any reasonably necessary income you receive for support for depender children. The monthly average of any child support payments, foster care payment disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.				r care payments, o 122C-1, that you	r	\$0	0.00	
i	41. Fill in all qualified retirement deductions. The monthly total of all amounts the employer withheld from wages as contributions for qualified retirement plans, a in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement properties in 11 U.S.C. § 362(b)(19).				ent plans, as specifi		\$	0.00	
42.	Total of	all deduction	ns allowed under 11 U.S.C. § 70	7(b)(2)(A). C	opy line 38 here	=>	\$\$	5.89	
43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.									
Des	cribe th	e special cir	cumstances		Amount of ex	pen	se		
					_ \$	i			
					\$				
					- \$				
							_		
	Total			0.00	0.00 Copy here=> \$		0.00		
44.	Total ad	justments. A	Add lines 40 through 43.		=>	\$_	4,596.89	Copy here=> -\$	4,596.89
			thly disposable income under §	1325(b)(2). S	Subtract line 44 fror	m lin	e 39.	\$	1,092.49
46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.									
Forn	n	Line	Reason for change		Date of chan	ge	Increase or decrease?	Amount	of change
□ 1 □ 1 □ 1 □ 1	22C-1 22C-2 22C-1 22C-2 22C-1 22C-2 22C-1						☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Decrease ☐ Increase	\$ \$	
	22C-2						Decrease	\$	

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Debtor 1 Jason George Voulgaris

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Jason George Voulgaris
 Jason George Voulgaris
 Signature of Debtor 1

Date July 16, 2019

Official Form 122C-2

MM / DD / YYYY

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Debtor 1 Jason George Voulgaris

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **DFAS Wages**

Year-to-Date Income:

Total Year-to-Date Income: \$26,391.09 from check dated 6/28/2019.

Average Monthly Income: \$4,398.52.

Line 10 - Income from all other sources Source of Income: VA Disability Income Constant income of \$1,290.86 per month.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:19-10895-SDB Doc#:1 Filed:07/16/19 Entered:07/16/19 09:00:03 Page:59 of 6019 8:59AM B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Georgia

	South	ern District of Georgia	a						
In	re Jason George Voulgaris		Case N	Vo					
		Debtor(s)	Chapte	er 13					
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR	DERTOR(S)					
				` '					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
	For legal services, I have agreed to accept		\$	4,500.00	<u> </u>				
	Prior to the filing of this statement I have received			100.00	<u> </u>				
	Balance Due		#	4,400.00	<u> </u>				
2.	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
3.	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are n	nembers and associ	ates of my law firm.				
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				of my law firm. A				
5.	In return for the above-disclosed fee, I have agreed to rend	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statengenere c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Fees are to be paid pursuant to the General 	nent of affairs and plan which and confirmation hearing, an	n may be required nd any adjourned	;	n bankruptcy;				
6.	By agreement with the debtor(s), the above-disclosed fee d	loes not include the following	g service:						
		CERTIFICATION							
thi	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement for	payment to me f	or representation of	of the debtor(s) in				
	July 16, 2019	/s/ Angela Williar	ns Seymour						
	Date	Angela Williams Seymour 636505							
		Signature of Attorne LAW FIRM OF SE		SOCIATES, P.C.					
		101-B Rossmore	Place	•					
		Augusta, GA 309 706-868-1968(O)		Fax) Fax:					
		guyseymour@se							

angieseymour@seymourbankruptcyfirm.com

Name of law firm

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PO BOX 8803 PO BOX 2278 WILMINGTON DE 19899-8803 ALPHARETTA GA 30023

CAPITAL ONE ATTN: MANAGING OFFICER/AGENT 15000 CAPITAL ONE DR. RICHMOND VA 23238 PAYPAL ATTN: MANAGING OFFICER/AGENT PO BOX 5138 TIMONIUM MD 21094

ATTN: MANAGING OFFICER/AGENT

OXFORD GLENN OF WRIGHTSBORO, LLC

CAPITAL ONE C/O COOLING & WINTERPORTFOLIO RECOVER ASSOC FOR CITIBANK ATTN: MANAGING OFFICER/AGENT
PO BOX 100150

MARIETTA GA 30061-9918

WINTERPORTFOLIO RECOVER ASSOC FOR CITIBANK ATTN: MANAGING OFFICER/AGENT
120 CORPORATE BLVD., SUITE 100
NORFOLK VA 23502

CHRYSLER CAPITAL
ATTN: MANAGING OFFCER/AGENT
PO BOX 961275
FORT WORTH TX 76161

PORTFOLIO RECOVER ASSOC FOR SYNCHRONY ATTN: MANAGING OFFICER/AGENT 120 CORPORATE BLVD., SUITE 100 NORFOLK VA 23502

DEPT OF EDUCATION/NELNET ATTN: MANAGING OFFICER/AGENT 121 S 13TH ST. LINCOLN NE 68508 QUICKEN LOANS ATTN: MANAGING OFFICER/AGENT 1050 WOODWARD AVE. DETROIT MI 48226

DISCOVER FIN SVCS LLC ATTN: MANAGING OFFICER/AGENT PO BOX 15316 WILMINGTON DE 19850 SYNCB/CARE CREDIT ATTN: MANAGING OFFICER/AGENT 950 FORRER BLVD. KETTERING OH 45420

JPMCB CARD ATTN: MANAGING OFFICER/AGENT PO BOX 15298 WILMINGTON DE 19850 SYNCB/OLD NAVY DC ATTN: MANAGING OFFICER/AGENT PO BOX 965005 ORLANDO FL 32896